FILING DATE SERIAL NO. CLAIMS ONLY APPLICANT(S) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED DEP. DEP. DEP. IND. IND. IND. DEP. IND. DEP. IND. TOTAL IND. TOTAL IND. <u>_</u> Û TOTAL DEP. TOTAL DEP. TOTAL * MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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